

PAST PERFORMANCE REPORT

Please complete this questionnaire. Handwritten responses are sufficient. If you need more space than that provided, please attach additional pages or write on the back. **Responses will be treated as confidential and will be used only by source selection officials in evaluating the offeror's submitted documents for the contract.**

Contractor/Subcontractor Name:

Customer/Account Name:

Address:

Primary Point of Contact Name: Title: Phone Number: Fax Number:

Alternate Point of Contact Name: Title Phone Number: Fax Number:

Contract Summary:

Period of Performance:

Type and Scope of Services Provided:

Contract Value:

1. Did the contractor achieve the objectives of the contract?

☐ exceeded objectives

☐ met objectives most of the time

☐ met objectives some of the time

☐ did not meet objectives

☐ not applicable

Comments:

2. Did the contractor meet the terms and conditions of the contract?

☐ exceeded expectations

☐ met expectations most of the time

☐ met expectations some of the time

☐ did not meet expectations

☐ not applicable

Comments:

3. Did the contractor perform in a timely manner?

☐ exceeded expectations

☐ met expectations most of the time

☐ met expectations some of the time

☐ did not meet expectations

☐ not applicable

Comments:

4. Was the contractor responsive to resolving problems (within the scope of the contract)?

☐ exceeded expectations

☐ met expectations most of the time

☐ met expectations some of the time

☐ did not meet expectations

☐ not applicable

Comments:

5. Did the attitude of the contractor's staff:

☐ exceed expectations

☐ meet expectations most of the time

☐ meet expectations some of the time

☐ not meet expectations

☐ not applicable

Comments:

6. Did the knowledge, skills and abilities of the contractor's staff:

☐ exceed expectations

☐ meet expectations most of the time

☐ meet expectations some of the time

☐ not meet expectations

☐ not applicable

Comments:

7. Were the customers satisfied?

☐ exceeded expectations

☐ met expectations most of the time

☐ met expectations some of the time

☐ did not meet expectations

☐ not applicable

Comments:

8. Did the contractor deliver at the agreed to price? ()Yes ()No
If no, why not?

9. Would you do business with this contractor in the future? ()Yes ()No
If no, why not?

10. Additional Comments.

Signature of Reference

Title

Date